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Russ F. Marsden Sierra Design Group 300 Sierra Manor Drive 06/07/2095:KRETEMAE9:9000021 10642839

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/642,839	08/18/2003	Robert Anthony Luciano JR.	CL2-01-001-CON.1	4014

TITLE OF INVENTION: LOTTERY-STYLE ON-DEMAND TICKET SYSTEM AND METHOD

APPLN.TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES- P D \$700 (400 \$0 \$700.005) EXAMINER ART UNIT CLASS-SUBCLASS DOLINAR, ANDREW M 3747 463-017000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address or Change of Correspondence Address form PTO/SB/12) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, or agents of the same of up to 3 registered patent attorneys or agents. If no name is 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 2 translated attorney or agent and the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the name of up to 3 registered patent attorneys or agents. If no name is 3 and 1,000 the names of up to 3 and 1,000 the name of								
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DOLINAR, ANDREW M 3747 463-017000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Address from PTO/SB/12) attached. 3. Change of correspondence address (or Change of Correspondence Address from PTO/SB/12) attached. 3. ASSIGNEE MAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been fill recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Signary Ge(s) are enclosed: Att. The following fee(s) are enclosed: Att. The following fee(s) are enclosed: Att. The following fee(s) are enclosed: Att. The print of the patent attorney or agents. If no name is listed, no name will be printed on the patent. If an assignment is identified below, the document has been fill recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Signary Ge(s) are enclosed: Attention of the patent attorney or agents. If no name is listed. A check in the amount of the fee(s) is enclosed. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. A check	nonprovisional	YES- PO	-\$700	1400	\$0	\$700-	1400	06/20/2005
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4b. Payment of Fee(s): Salasue Fee	CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth in (A) NAME OF ASSIGNES CONTRACTORY OF AS	dence address (or Change of 22) attached. ation (or "Fee Address" Indic or more recent) attached. Us DRESIDENCE DATA TO E and assignee is identified ben 37 CFR 3.11. Completion NEE	Correspondence ation form the of a Customer BE PRINTED ON the low, no assignee of this form is NO (E)	(1) the na or agents (2) the na registered 2 registere listed, no THE PATEN data will app T a substitute (3) RESIDEN	ames of up to 3 registered pate OR, alternatively, ame of a single firm (having as a attorney or agent) and the na ed patent attorneys or agents. In name will be printed. T (print or type) pear on the patent. If an assign for filing an assignment. CE: (CITY and STATE OR CO	ent attorneys a member a mes of up to If no name is genee is identified be	elow, the doo	cument has been filed fo
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other posterior as shown by the records of the United States Patent and Trademark Office. Authorized Signature	_	·		The Dir Deposit Ac	rector is hereby authorized by count Number	charge the required	fee(s), or c	redit any overpayment, py of this form).
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ED365567616US PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 ...S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/642,839 Filing Date TRANSMITTAL 08/18/2003 First Named Inventor **FORM** Luciano Art Unit 3747 **Examiner Name** Dolinar (to be used for all correspondence after initial filing) **Attorney Docket Number** CL2-01-001-CON.1 2+Check

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ENCLOSURES (Check all that apply)											
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	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application				Petition Petition to Convert to a Provisional Application Power of Attomey, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Part B - Issue Fee Transmittal Check			
Reply to Missing Parts under 37 CFR 1.52 or 1.53							***				
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Date	03-June-2005 Reg. No. 43,775										
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